
NHATS Round 2: Last Month of Life

Section LM [LAST MONTH]

Sequence: 2.75

BOX LM1PRE

BOX LM1PRE

NOT ON FILE

If NotAlertFlag=1, go to LM4.

Otherwise, go to LM1PRE.

LM1PRE

LM1PRE

NOT ON FILE

QUESTION TEXT:

These next few questions are about {SP}'s care in the last month of life. If {he/she} did not receive any care in the last month, a few of those questions might not apply. If this is the case, just let me know, and we'll go on to the next question.

PRESS 1 AND ENTER TO CONTINUE

LM1

lm2pain

R2 LM1 PAIN IN LAST MONTH

QUESTION TEXT:

During the last month of {SP}'s life, were there times when {he/she} experienced pain?

CODES

1	YES	
2	NO	LM2
	REFUSED	LM2
	DON'T KNOW	LM2

LM1A

lm2painhlp

R2 LM1A GET HELP WITH PAIN

QUESTION TEXT:

Did {SP} get any help in dealing with {his/her} pain?

CODES

1	YES	
2	NO	LM2
	REFUSED	LM2
	DON'T KNOW	LM2

LM1B

lm2painhlpam

R2 LM1B PAIN HELP AMOUNT

QUESTION TEXT:

How much help in dealing with {his/her} pain did {SP} receive: less than was needed, more than was needed, or about the right amount?

CODES

1	LESS THAN WAS NEEDED
2	MORE THAN WAS NEEDED
3	ABOUT RIGHT AMOUNT
	REFUSED
	DON'T KNOW

LM2 **lm2bre** R2 LM2 BREATHING TROUBLE

QUESTION TEXT:

During the last month of {SP}'s life, were there times when {he/she} had trouble breathing?

CODES

- | | | |
|---|------------|-----|
| 1 | YES | |
| 2 | NO | LM3 |
| | REFUSED | LM3 |
| | DON'T KNOW | LM3 |

LM2A **lm2brehlp** R2 LM2A GET HELP WITH BREATHING

QUESTION TEXT:

Did {SP} get any help in dealing with {his/her} trouble breathing?

CODES

- | | | |
|---|------------|-----|
| 1 | YES | |
| 2 | NO | LM3 |
| | REFUSED | LM3 |
| | DON'T KNOW | LM3 |

LM2B **lm2brehlpam** R2 LM2B BREATHING HELP AMOUNT

QUESTION TEXT:

How much help in dealing with {his/her} breathing did {SP} receive: less than was needed, more than was needed, or about the right amount?

CODES

- | | |
|---|----------------------|
| 1 | LESS THAN WAS NEEDED |
| 2 | MORE THAN WAS NEEDED |
| 3 | ABOUT RIGHT AMOUNT |
| | REFUSED |
| | DON'T KNOW |

LM3 **lm2sad** R2 LM3 ANXIOUS OR SAD LAST MONTH

QUESTION TEXT:

During the last month of {SP}'s life, did {he/she} have any feelings of anxiety or sadness?

CODES

- | | | |
|---|------------|-----|
| 1 | YES | |
| 2 | NO | LM4 |
| | REFUSED | LM4 |
| | DON'T KNOW | LM4 |

LM3a **lm2sadhlp** R2 LM3A GET HELP FOR ANXIOUS SAD

QUESTION TEXT:

Did {SP} get any help in dealing with {his/her} feelings of anxiety or sadness?

CODES

- | | |
|---|-----|
| 1 | YES |
|---|-----|

2	NO	LM4
	REFUSED	LM4
	DON'T KNOW	LM4

LM3B **Im2sadhlpam** R2 LM3B ANXIOUS SAD HELP AMOUNT

QUESTION TEXT:

How much help in dealing with these feelings did {SP} receive: less than was needed, more than was needed, or about the right amount?

CODES

- 1 LESS THAN WAS NEEDED
- 2 MORE THAN WAS NEEDED
- 3 ABOUT RIGHT AMOUNT
- REFUSED
- DON'T KNOW

LM4 **Im2caredecis** R2 LM4 DEC ABOUT CARE WO INPUT

QUESTION TEXT:

During the last month of {SP}'s life, was there ever a decision made about {his/her} care or treatment without enough input from {him/her} or {his/her} family?

CODES

- 1 YES
- 2 NO
- 3 DOES NOT APPLY/NO CARE IN LAST MONTH OF LIFE
- REFUSED
- DON'T KNOW

LM5 **Im2carenowan** R2 LM5 DEC ABOUT CARE NOT WANTED

QUESTION TEXT:

During the last month of {SP}'s life, was there any decision made about care or treatment that {he/she} would not have wanted?

CODES

- 1 YES
- 2 NO
- 3 DOES NOT APPLY/NO CARE IN LAST MONTH OF LIFE
- REFUSED
- DON'T KNOW

LM6 **Im2perscare** R2 LM6 PERSONAL CARE NEEDS MET

QUESTION TEXT:

During the last month of {SP}'s life, how often were {his/her} personal care needs, such as bathing, dressing, and changing bedding, taken care of as well as they should have been: always, usually, sometimes, or never?

CODES

- 1 ALWAYS
- 2 USUALLY
- 3 SOMETIMES
- 4 NEVER
- 5 DOES NOT APPLY/NO CARE IN LAST MONTH OF LIFE

REFUSED
DON'T KNOW

LM7**Im2respect**

R2 LM7 TREATED WITH RESPECT

QUESTION TEXT:

During the last month of {SP}'s life, how often were {he/she} treated with respect by those who were taking care of {him/her}: always, usually, sometimes, or never?

CODES

- 1 ALWAYS
- 2 USUALLY
- 3 SOMETIMES
- 4 NEVER
- 5 DOES NOT APPLY/NO CARE IN LAST MONTH OF LIFE
REFUSED
DON'T KNOW

LM8**Im2informed**

R2 LM8 INFORMED ABOUT CONDITION

QUESTION TEXT:

During the last month of {SP}'s life, how often were you or other family members kept informed about {him/her} condition: always, usually, sometimes, or never?

CODES

- 1 ALWAYS
- 2 USUALLY
- 3 SOMETIMES
- 4 NEVER
- 5 DOES NOT APPLY/NO CARE IN LAST MONTH OF LIFE
REFUSED
DON'T KNOW

LM9**Im2doctor**

R2 LM9 MORE THAN ONE DOCTOR

QUESTION TEXT:

During the last month of {SP}'s life, was there more than one doctor involved in {his/her} care?

CODES

- 1 YES
- 2 NO BOX LM10
- 3 DOES NOT APPLY/NO CARE IN LAST MONTH OF LIFE BOX LM10
REFUSED BOX LM10
DON'T KNOW BOX LM10

LM9A**Im2docclear**

R2 LM9A CLEAR DOCTOR IN CHARGE

QUESTION TEXT:

During the last month of {SP}'s life, was it always clear to you which doctor was in charge of {his/her} care?

CODES

- 1 YES
- 2 NO
REFUSED
DON'T KNOW

BOX LM10**BOX LM10**

NOT ON FILE

IF NOTALERTFLAG=1 (YES), go to LM11.

Otherwise, go to LM10.

LM10**Im2relg**

R2 LM10 TALK RELIGIOUS BELIEFS

QUESTION TEXT:

During the last month of life, did any doctors, nurses, other health professional talk with {SP} about {his/her} religious beliefs?

CODES

1	YES	
2	NO	LM11
3	DOES NOT APPLY/NO CARE IN LAST MONTH OF LIFE	LM11
	REFUSED	LM11
	DON'T KNOW	LM11

LM10A**Im2relgamt**

R2 LM10A RELIGIOUS BELIEF CONTACT

QUESTION TEXT:

During the last month of {SP}'s life, do you think {he/she} had as much contact of this kind as {he/she} wanted?

CODES

1	YES	
2	NO	
	REFUSED	
	DON'T KNOW	

LM11**Im2ratecare**

R2 LM11 HOW RATE CARE

QUESTION TEXT:

Overall, how would rate {SP}'s care in the last month of life? Would you say it was, excellent, very good, good, fair, or poor?

CODES

1	EXCELLENT	
2	VERY GOOD	
3	GOOD	
4	FAIR	
5	POOR	
	REFUSED	
	DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

Go to Section MD – Mobility Devices
